

NOTICE OF COMPLETION FOR PERMITTED PROJECTS

Completion and submittal of this form to the Permit Committee is in compliance with polices and procedures adopted by the Board of Trustees of the Mississippi Department of Archives and History and is in accordance with the State Antiquities Law (39-7-22 et seq. of the Mississippi Code of 1972, as amended).

	County of project			
Permittee's address	City		Zip	
Contact Person	Phone(s)	/		
Title/Position				
Contact Person's Address (if different from բ	permittee)			
Street/P.O. Box	City		Zip	
Signature of permittee/contact person		_ email:		
DATE	MDAH Project	MDAH Project #		
Buildings and Structures (ONLY)				
Did the project involve an addition to, destruction, alteration, or enovation of any structure?		YES	□ NO	
Name and/or address of structure(s):				
Briefly describe the project scope of work: _				
Has all work related to this project been com	npleted?	YES	□ NO	
Has all work related to this project been com		YES YES	□ NO	
, ,	has not been completed?	YES		

Were there any project components outside the anticipated
scope of work and/or discoveries during the project?

(If so, please attach any reports and/or photographs produced regarding discoveries found during project)

The Notice of Completion must include photo(s) of the subject property
in its current or "AFTER" condition and/or permitted project components as completed.

Use of printed digital images are acceptable if clear.

old the project involve grading, trenching, use of fill material or ny other ground disturbing activity?	YES	NO 🗖
riefly Describe the project scope of work.		
Vas a cultural resources/archaeological survey onducted for this site? If YES, name the archaeologist and date of report(s).	YES	NO 🗖
las the work related to this project been completed?	YES	NO 🗆
s there any additional work in progress that has not been completed?	YES	NO 🗆
s there any work planned for the property in the immediate future? Striefly Describe any work that is in progress or planned for the immediate future:	YES	NO 🗖

Please include photo(s) of the subject property in its current or "AFTER" condition.

Use of printed digital images are acceptable if clear.

MAIL COMPLETED FORM AND ATTACHMENTS TO:

Mississippi Landmark Program Coordinator Historic Preservation Division Mississippi Department of Archives and History P.O. Box 571 Jackson, Mississippi 39205-0571 **FOR FURTHER INFORMATION:**

YES □ NO □

Phone: (601) 576-6940 Fax: (601) 576-6955